



Patent  
9007-1012

**IN THE U. S. PATENT AND TRADEMARK OFFICE**

In re application of

Khaled Awad Saleh NASHWAN Conf. 1412

Application No. 10/534,018 Group 3762

Filed: May 5, 2005 Examiner

TITLE: APPARATUS FOR TREATING PATIENTS  
SUFFERING FROM VASCULAR DISEASE  
BY MEANS OF INFRA-, AUDIBLE-AND  
UNTRASOUND WAVES

**LETTER SUBMITTING SUPPLEMENTAL APPLICATION DATA SHEET**

Assistant Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

July 11, 2005

Sir:

We enclose herewith the substitute Application Data  
Sheet (ADS), changing:

- (1) On Page 2, the international application date of  
PCT/HU2003/000091 should be changed from 11/11/03  
to **05/11/03**.
- (2) On Page 2, the priority filing date of  
application No. P0203794 should be changed from  
11/11/02 to **05/11/02**.

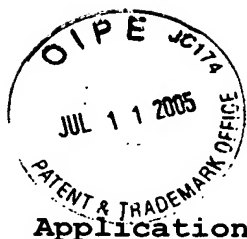
No new matter is added.

Respectfully submitted,

YOUNG & THOMPSON

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RJP/jlw



**Application Data Sheet**

**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	0
Number of Copies of CDs::	0
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	AN APPARATUS FOR TREATING PATIENTS SUFFERING FROM VASCULAR DISEASE BY MEANS OF INFRA,-AUDIBLE-AND ULTRASOUND WAVES
Attorney Docket Number::	9007-1012
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	0
Total Drawing Sheets::	2
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: REPUBLIC OF YEMEN  
Status:: Full Capacity  
Given Name:: KHALED AWAD SALEH  
Middle Name::  
Family Name:: NASHWAN  
Name Suffix::  
City of Residence:: PECS  
State or Province of  
Residence::  
Country of Residence:: HUNGARY  
Street of Mailing ENDRESZ GYORGY U. 1/B  
Address::  
City of Mailing Address:: PECS  
State or Province of Mailing Address::  
Country of Mailing Address:: HUNGARY  
Postal or Zip Code of Mailing Address:: H-7633

**Correspondence Information**

Correspondence Customer 00466  
Number::

**Representative Information**

Representative Customer	00466
Number::	

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/HU2003/000091	11/11/03 <u>05/11/03</u>

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
HUNGARY	P0203794	<del>11/11/02</del> <u>05/11/02</u>	Yes

**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::